

17458

PTO/SB/21 (08-03)

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TRANSMITTAL FORM

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Application Number	09/484,799	RECEIVED	
Filing Date	01/18/00	OCT 24 2003	
First Named Inventor	Barker	TC 1700	
Art Unit	1745		
Examiner Name	Chaney, C.		
Total Number of Pages in This Submission	58	Attorney Docket Number	VT-1869

ENCLOSURES (check all that apply)

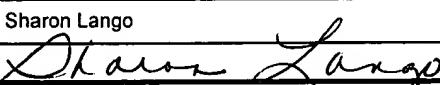
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input checked="" type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <small>(please identify below):</small> Exhibit 1 (translation of NI Article); Exhibit 2 (Declaration of Biying Huang); and self-addressed, return postcard
Remarks		This Application has been granted SPECIAL STATUS under 37 CFR 1.102.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Michael Ross, Reg. No. 45,057
Signature	
Date	October 17, 2003

CERTIFICATE OF TRANSMISSION/MAILING

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Date	October 17, 2003

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FEE TRANSMITTAL for FY 2003

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$200.00)

Application Number	09/484,799
Filing Date	1/18/00
First Named Inventor	Barker
Examiner Name	Chaney, C.
Group Art Unit	1745
Attorney Docket No.	TC 1700 VT-1869

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OCT 24 2003

TC 1700

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)																							
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other None			3. ADDITIONAL FEES																							
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number 220100 Deposit Account Name Valence Technology, Inc.			Large Entity	Small Entity																						
The Commissioner is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.			Fee Code (\$)	Fee Code (\$)	Fee Description																					
FEE CALCULATION																										
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** or number previously paid, if greater; For Reissues, see above			Other fee (specify)		SUBTOTAL (3) (\$)	110.00																				
*Reduced by Basic Filing Fee Paid																										

Name (Print/Type)	Michael Ross	Registration No. (Attorney/Agent)	45,057	Telephone	702-558-1071
Signature				Date	10/17/2003

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